PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2000 General Assembly.

## **HOUSE ENROLLED ACT No. 1951**

AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 25-26-13-2, AS AMENDED BY P.L.187-1999, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 2. As used in this chapter:

"Board" means the Indiana board of pharmacy.

"Controlled drugs" are those drugs on schedules I through V of the Federal Controlled Substances Act or on schedules I through V of IC 35-48-2.

"Counseling" means effective communication between a pharmacist and a patient concerning the contents, drug to drug interactions, route, dosage, form, directions for use, precautions, and effective use of a drug or device to improve the therapeutic outcome of the patient through the effective use of the drug or device.

"Dispensing" means issuing one (1) or more doses of a drug in a suitable container with appropriate labeling for subsequent administration to or use by a patient.

"Drug" means:

- (1) articles or substances recognized in the official United States Pharmacopoeia, official National Formulary, official Homeopathic Pharmacopoeia of the United States, or any supplement to any of them;
- (2) articles or substances intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in man or animals;



- (3) articles other than food intended to affect the structure or any function of the body of man or animals; or
- (4) articles intended for use as a component of any article specified in subdivisions (1) through (3) and devices.

"Drug order" means a written order in a hospital or other health care institution for an ultimate user for any drug or device, issued and signed by a practitioner, or an order transmitted by other means of communication from a practitioner, which is immediately reduced to writing by the pharmacist, registered nurse, or other licensed health care practitioner authorized by the hospital or institution. The order shall contain the name and bed number of the patient; the name and strength or size of the drug or device; unless specified by individual institution policy or guideline, the amount to be dispensed either in quantity or days; adequate directions for the proper use of the drug or device when it is administered to the patient; and the name of the prescriber.

"Drug regimen review" means the retrospective, concurrent, and prospective review by a pharmacist of a patient's drug related history that includes the following areas:

- (1) Evaluation of prescriptions or drug orders and patient records for drug allergies, rational therapy contradictions, appropriate dose and route of administration, appropriate directions for use, or duplicative therapies.
- (2) Evaluation of prescriptions or drug orders and patient records for drug-drug, drug-food, drug-disease, and drug-clinical laboratory interactions.
- (3) Evaluation of prescriptions or drug orders and patient records for adverse drug reactions.
- (4) Evaluation of prescriptions or drug orders and patient records for proper utilization and optimal therapeutic outcomes.

"Drug utilization review" means a program designed to measure and assess on a retrospective and prospective basis the proper use of drugs.

"Device" means an instrument, apparatus, implement, machine, contrivance, implant, invitro in vitro reagent, or other similar or related article including any component part or accessory, which is:

- (1) recognized in the official United States Pharmacopoeia, official National Formulary, or any supplement to them;
- (2) intended for use in the diagnosis of disease or other conditions or the cure, mitigation, treatment, or prevention of disease in man or other animals; or
- (3) intended to affect the structure or any function of the body of man or other animals and which does not achieve any of its

C O P principal intended purposes through chemical action within or on the body of man or other animals and which is not dependent upon being metabolized for the achievement of any of its principal intended purposes.

"Investigational or new drug" means any drug which is limited by state or federal law to use under professional supervision of a practitioner authorized by law to prescribe or administer such drug.

"Legend drug" has the meaning set forth in IC 16-18-2-199.

"License" and "permit" are interchangeable and mean a written certificate from the Indiana board of pharmacy for the practice of pharmacy or the operation of a pharmacy.

"Nonprescription drug" means a drug that may be sold without a prescription and that is labeled for use by a patient in accordance with state and federal laws.

"Person" means any individual, partnership, copartnership, firm, company, corporation, association, joint stock company, trust, estate, or municipality, or a legal representative or agent, unless this chapter expressly provides otherwise.

"Practitioner" means a physician licensed under IC 25-22.5, a has the meaning set forth in IC 16-42-19-5. veterinarian licensed under IC 15-5-1.1, a dentist licensed under IC 25-14, a podiatrist licensed under IC 25-29, or any other person licensed by law to prescribe and administer legend drugs in this state.

"Pharmacist" means a person licensed under this chapter.

"Pharmacist extern" means a pharmacy student enrolled full-time in an approved school of pharmacy and who is working in a school sponsored, board approved program related to the practice of pharmacy.

"Pharmacist intern" means a person who is working to secure additional hours of practice and experience prior to making application for a license to practice as a pharmacist.

"Pharmacy" means any facility, department, or other place where prescriptions are filled or compounded and are sold, dispensed, offered, or displayed for sale and which has as its principal purpose the dispensing of drug and health supplies intended for the general health, welfare, and safety of the public, without placing any other activity on a more important level than the practice of pharmacy.

"The practice of pharmacy" or "the practice of the profession of pharmacy" means a patient oriented health care profession in which pharmacists interact with and counsel patients and with other health care professionals concerning drugs and devices used to enhance patients' wellness, prevent illness, and optimize the outcome of a drug





or device, by accepting responsibility for performing or supervising a pharmacist intern, a pharmacist extern, or an unlicensed person under section 18(a)(4) of this chapter to do the following acts, services, and operations:

- (1) The offering of or performing of those acts, service operations, or transactions incidental to the interpretation, evaluation, and implementation of prescriptions or drug orders.
- (2) The compounding, labeling, administering, dispensing, or selling of drugs and devices, including radioactive substances, whether dispensed under a practitioner's prescription or drug order, or sold or given directly to the ultimate consumer.
- (3) The proper and safe storage and distribution of drugs and devices.
- (4) The maintenance of proper records of the receipt, storage, sale, and dispensing of drugs and devices.
- (5) Counseling, advising, and educating patients, patients' caregivers, and health care providers and professionals, as necessary, as to the contents, therapeutic values, uses, significant problems, risks, and appropriate manner of use of drugs and devices.
- (6) Assessing, recording, and reporting events related to the use of drugs or devices.
- (7) Provision of the professional acts, professional decisions, and professional services necessary to maintain all areas of a patient's pharmacy related care as specifically authorized to a pharmacist under this article.

"Prescription" means a written order or an order transmitted by other means of communication from a practitioner to or for an ultimate user for any drug or device containing:

- (1) the name and address of the patient;
- (2) the date of issue;

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- (3) the name and strength or size (if applicable) of the drug or device;
- (4) the amount to be dispensed (unless indicated by directions and duration of therapy);
- (5) adequate directions for the proper use of the drug or device by the patient; and
- (6) the name of the practitioner; issued and
- (7) the signature of the practitioner if the prescription is in written form. signed by a practitioner.

"Record" means all papers, letters, memoranda, notes, prescriptions, drug orders, invoices, statements, patient medication charts or files,

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computerized records, or other written indicia, documents or objects which are used in any way in connection with the purchase, sale, or handling of any drug or device.

"Sale" means every sale and includes:

- (1) manufacturing, processing, transporting, handling, packaging, or any other production, preparation, or repackaging;
- (2) exposure, offer, or any other proffer;
- (3) holding, storing, or any other possession;
- (4) dispensing, giving, delivering, or any other supplying; and
- (5) applying, administering, or any other using.

SECTION 2. IC 25-26-13-12 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 12. (a) An individual who is licensed as a pharmacist in another state where the requirements for licensure were not less than those required in this state at the time of original licensure may be issued a license in this state if:

- (1) the individual has registered with and been approved by the National Association of Boards of Pharmacy;
- (2) the individual has graduated with a professional degree in pharmacy from a school of pharmacy accredited by the American Council of Pharmaceutical Education or the Canadian Council on Pharmacy Accreditation and approved by the board;
- (3) the individual has successfully completed an examination administered by the board concerning the federal statutes and regulations and the Indiana statutes and rules governing the practice of pharmacy; and
- (4) in the case of an individual who has not been actively engaged in the practice of pharmacy for the twelve (12) months immediately preceding the individual's application, the individual has successfully completed a practical examination administered by the board.
- (b) An individual who has a professional pharmacy degree from a school of pharmacy located outside the United States and Canada and who is licensed in another state where the requirements for licensure are substantially the same as those in this state may be issued a license under this chapter if:
  - (1) the individual has registered with and been approved by the National Association of Boards of Pharmacy;
  - (2) the individual has provided the board with proof of the applicant's:
    - (A) academic record and graduation with a professional degree from a school of pharmacy;







Equivalency Examination (FPGEE) approved by the National Association of Boards of Pharmacy; and

- (C) successful completion of an English proficiency examination approved by the board;
- (3) the individual has successfully completed an examination administered by the board concerning the **federal statutes and regulations and the** Indiana statutes and rules governing the practice of pharmacy; and
- (4) in the event that the individual has not been actively engaged in the practice of pharmacy in the twelve (12) months preceding the application, the individual has successfully completed a practical examination administered by the board.

SECTION 3. IC 25-26-13-19 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 19. (a) A pharmacy holding a Type I or Type VI permit may be open to the general public without a pharmacist on duty if the following conditions are met:

- (1) Approval is obtained from the board.
- (2) All legend drugs and other merchandise that can only be dispensed by a pharmacist are securely locked or secured by an alternative system approved by the board when the pharmacist is absent.
- (3) During the pharmacist's absence, a sign at least twenty (20) inches by thirty (30) inches is prominently displayed in the prescription department stating: "Prescription Department Closed, No Pharmacist on Duty".
- (4) Only a pharmacist has access to the secured area. when the pharmacist is absent.
- (b) The board may revoke or limit a pharmacy's privilege under this section after a hearing under IC 4-21.5-3.

SECTION 4. IC 25-26-13-25, AS AMENDED BY P.L.187-1999, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 25. (a) All original prescriptions, whether in written or electronic format, shall be numbered and maintained in numerical and chronological order, or in a manner approved by the board and accessible for at least two (2) years in the pharmacy. A prescription transmitted from a practitioner by means of communication other than writing must immediately be reduced to writing or recorded in an electronic format by the pharmacist. The files shall be open for inspection to any member of the board or its duly authorized agent or representative.

(b) A prescription for any drug, the label of which bears the legend, "Caution: Federal law prohibits dispensing without prescription" or









"Rx Only", may not be refilled without written or oral authorization of a licensed practitioner.

- (c) The refill record shall include:
  - (1) the date of the refill;
  - (2) the quantity dispensed if other than the original quantity; and
  - (3) the dispenser's identity on:
    - (A) the original prescription form; or
    - (B) another board approved, uniformly maintained, readily retrievable record.
- (d) The original prescription form or the other board approved record described in subsection (c) must indicate by the number of the original prescription the following information:
  - (1) The name and dosage form of the drug.
  - (2) The date of each refill.
  - (3) The quantity dispensed.
  - (4) The identity of the pharmacist who dispensed the refill.
  - (5) The total number of refills for that prescription.
- (e) A prescription is valid for not more than one (1) year after the original date of filling. issue.
- (f) A pharmacist may not knowingly dispense a prescription after the demise of the practitioner, unless in the pharmacist's professional judgment it is in the best interest of the patient's health.
- (g) A pharmacist may not knowingly dispense a prescription after the demise of the patient.
- (h) A pharmacist or a pharmacy shall not accept medication that is returned for resale or redistribution unless the medication:
  - (1) was dispensed to a patient residing in an institutional facility (as defined in 856 IAC 1-28-1(a));
  - (2) was properly stored and securely maintained according to sound pharmacy practices;
  - (3) is returned unopened and:
    - (A) was dispensed in the manufacturer's original:
      - (i) bulk, multiple dose container with an unbroken tamper resistant seal; or
      - (ii) unit dose package; or
    - (B) was packaged by the dispensing pharmacy in a:
      - (i) multiple dose blister container; or
      - (ii) unit dose package;
  - (4) was dispensed by the same pharmacy as the pharmacy accepting the return;
  - (5) is not expired; and
  - (6) is not a controlled substance (as defined in IC 35-48-1-9),





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unless the pharmacy holds a Type II permit (as defined in IC 25-26-13-17).

(i) A pharmacist may use the pharmacist's professional judgment as to whether to accept medication for return under subsection (h).

SECTION 5. IC 25-26-15-10 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 10. As used in this chapter, "prescription" means

(1) a written order, or an order transmitted by other means of communication that is immediately reduced to writing by the pharmacist, from an optometrist to or for an ultimate user for a drug or device, containing:

(A) (1) the name and address of the patient;

- (2) the date of issue;
- (B) (3) the name and strength or size (if applicable) of the drug or device;
- (C) (4) the amount to be dispensed (unless indicated by directions and duration of therapy);
- (D) (5) adequate directions for the proper use of the drug or device by the patient; and
- (E) (6) the name and certification number of the prescribing optometrist; issued and signed by
- (7) the signature of the optometrist if the prescription is in written form. or
- (2) an order transmitted by other means of communication from an optometrist that is immediately reduced to writing by the pharmacist.

SECTION 6. IC 25-27.5-1-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 1. This article does not apply to the following:

- (1) A physician assistant trainee or a student enrolled in a physician assistant or a surgeon assistant educational program accredited by the CAHEA, an accrediting agency.
- (2) A physician assistant employed in the service of the federal government while performing duties incident to that employment.
- (3) A health care professional, technician, and or other assistant or employee of a physician who performs delegated tasks in the office of a physician but who does not render services as a physician assistant or profess to be a physician assistant.

SECTION 7. IC 25-27.5-2-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 2. "Approved program" means a physician assistant or a surgeon assistant program accredited by CAHEA, an accrediting agency.

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SECTION 8. IC 25-27.5-2-4.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: **Sec. 4.5.** "Accrediting agency" refers to any of the following, including a successor agency to any of the following:

- (1) Accreditation Review Commission on Education for the Physician Assistant.
- (2) Commission on Accreditation of Allied Health Education Programs (CAAHEP).
- (3) Committee on Allied Health Education and Accreditation of the American Medical Association (CAHEA).

SECTION 9. IC 25-27.5-2-10 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 10. "Physician assistant" means an individual who has:

- (1) graduated from a physician assistant or a surgeon assistant program accredited by the CAHEA, an accrediting agency; and
- (2) passed the certifying examination administered by the NCCPA and maintains certification by the NCCPA; and
- (3) been certified by the committee.

SECTION 10. IC 25-27.5-4-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 1. An individual must be certified by the committee before the individual may practice as a physician assistant. The committee may grant a certificate as a physician assistant to an applicant who does the following:

- (1) Submits an application on forms approved by the committee.
- (2) Pays the fee established by the board.
- (3) Has:
  - (A) successfully completed an educational program for physician assistants or surgeon assistants accredited by the CAHEA, an accrediting agency; and
  - (B) has passed the Physician Assistant National Certifying Examination administered by the NCCPA or other examination approved by the committee and maintains current NCCPA certification.
- (4) Submits to the committee any other information the committee requires considers necessary to evaluate the applicant's qualifications.
- (5) Presents satisfactory evidence to the committee that the individual has not been:
  - (A) engaged in an act that would constitute grounds for a disciplinary sanction under IC 25-1-9; and or
  - (B) the subject of a disciplinary action by a licensing or







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certification agency of another state or jurisdiction on the grounds that the individual was not able to practice as a physician assistant without endangering the public.

SECTION 11. IC 25-27.5-6-5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 5. (a) Before initiating practice the supervising physician and the physician assistant must submit, on forms approved by the board, the following information:

- (1) The name, the business address, and the telephone number of the supervising physician.
- (2) The name, the business address, and the telephone number of the physician assistant.
- (3) A brief description of the setting in which the physician assistant will practice.
- (4) Any other information required by the board.
- (b) A physician assistant must notify the board committee of any changes or additions in practice sites or supervising physicians not more than thirty (30) days after the change or addition.

SECTION 12. IC 25-34.5-1-4.7, AS ADDED BY P.L.60-2000, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 4.7. "Other authorized health care professional" means a licensed health care professional whose scope of practice:

- (1) includes the respiratory care practice task being supervised;
- (2) authorizes the professional to supervise an individual who is not licensed, certified, or registered as a health care professional. SECTION 13. IC 25-34.5-2-6.4, AS ADDED BY P.L.60-2000, SECTION 12, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 6.4. (a) Notwithstanding any other law and except as otherwise provided in this article, to perform the practice
  - (1) a practitioner; or
  - (2) a licensed, registered, or certified health care professional whose scope of practice includes the respiratory care practice.
- **(b)** An individual who is not a licensed, registered, or certified health care professional may perform a task only:

of respiratory care other than a task, an individual must be:

- (1) under the proximate supervision of a practitioner or other authorized health care professional; and
- (2) if the individual has demonstrated to the facility that employs or contracts with the individual competency to perform the task. The facility shall document competency in accordance with licensure, certification, and accreditation standards applicable to the facility.
  - (b) (c) A practitioner may do the following:

- (1) Delegate tasks.
- (2) Supervise the performance of tasks.

SECTION 14. IC 25-34.5-2-14, AS ADDED BY P.L.60-2000, SECTION 20, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 14. (a) The committee may shall issue a student permit to an individual if the individual does the following:

- (1) Submits the appropriate application to the committee.
- (2) Pays the fee established by the board.
- (3) Submits **written** proof to the committee that the individual is a student in good standing in a respiratory care **school or** program **that has been:** 
  - (A) approved by the committee for purposes of section 8(b)(1) of this chapter;
  - (B) approved by the committee for purposes of section 10.1(a)(3)(B) of this chapter; or
  - (C) otherwise approved by the committee.
- (4) Submits satisfactory evidence that the individual:
  - (A) does not have a conviction described in section 8(a)(1) of this chapter; and
  - (B) has not been the subject of a disciplinary action described in section 8(a)(2) of this chapter.
- (b) The committee shall issue a student permit as soon as it is reasonably practicable after an individual fulfills the requirements of subsection (a).
- (b) (c) An individual who holds a student permit may only perform respiratory care procedures that have been part of a course:
  - (1) the individual has successfully completed in the respiratory care program designated under subsection (a)(3); and
  - (2) for which the successful completion has been documented and that is available upon request to the committee.
- (d) The committee may expand the list of respiratory care procedures that an individual may perform under the individual's student permit to include additional respiratory care procedures that have been part of a course:
  - (1) that the individual has successfully completed in the respiratory care program designated under subsection (a)(3); and
  - (2) for which the individual's successful completion has been documented.

Upon request by the committee, the individual shall provide documentation of the successful completion of a course described in this subsection.



- (c) (e) The procedures permitted by subsection (b) under subsections (c) and (d) may be performed only:
  - (1) on adult patients who are not critical care patients; and
  - (2) under the proximate supervision of a practitioner.
- (f) A holder of a student permit shall meet in person at least one (1) time each working day with the permit holder's supervising practitioner or a designated respiratory care practitioner to review the permit holder's clinical activities. The supervising practitioner or a designated respiratory care practitioner shall review and countersign the entries that the permit holder makes in a patient's medical record not more than seven (7) calendar days after the permit holder makes the entries.
- (g) A supervising practitioner may not supervise at one (1) time more than three (3) holders of student permits issued under this section.
  - (d) (h) A student permit expires on the earliest of the following:
    - (1) The date the permit holder is issued a license under this article.
    - (2) The date the committee disapproves the permit holder's application for a license under this article.
    - (3) The date the permit holder ceases to be a student in good standing in a respiratory care program approved by the committee. The graduation of a student permit holder from a respiratory care program approved by the committee does not cause the student permit to expire under this subdivision.
    - (4) Sixty (60) days after the date that the permit holder graduates from a respiratory care program approved by the committee.
    - (5) The date that the permit holder is notified that the permit holder has failed the licensure examination.
    - (6) Two (2) years after the date of issuance.

SECTION 15. IC 35-48-2-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 4. (a) The controlled substances listed in this section are included in schedule I.

(b) Opiates. Any of the following opiates, including their isomers, esters, ethers, salts, and salts of isomers, esters, and ethers, unless specifically excepted by rule of the board or unless listed in another schedule, whenever the existence of these isomers, esters, ethers, and salts is possible within the specific chemical designation:

Acetylmethadol (9601)

Allylprodine (9602)

Alphacetylmethadol (9603)

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Alphameprodine (9604) Alphamethadol (9605) Alphamethylfentanyl (9614) Benzethidine (9606) Betacetylmethadol (9607) Betameprodine (9608) Betamethadol (9609) Betaprodine (9611) Clonitazene (9612) Dextromoramide (9613) Diampromide (9615) Diethylthiambutene (9616) Difenoxin (9168) Dimenoxadol (9617) Dimepheptanol (9618) Dimethylthiambutene (9619) Dioxaphetyl butyrate (9621) Dipipanone (9622) Ethylmethylthiambutene (9623) Etonitazene (9624) Etoxeridine (9625) Furethidine (9626) Hydroxypethidine (9627) Ketobemidone (9628) Levomoramide (9629) Levophenacylmorphan (9631) 3-Methylfentanyl [N-[3-methyl-1-(2-phenylethyl)-4piperidyl]-N-phenyl-propanimide](9813) MPPP (1-methyl-4-phenyl-4-propionoxypiperidine) (9961) Morpheridine (9632) Noracymethadol (9633) Norlevorphanol (9634) Normethadone (9635) Norpipanone (9636) Phenadoxone (9637) Phenampromide (9638) Phenomorphan (9647) Phenoperidine (9641) PEPAP [1-(2-phenethyl)-4-phenyl-4-acetoxypiperidine] (9663) Piritramide (9642)

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Proheptazine (9643) Properidine (9644)



Propiram (9649)

Racemoramide (9645)

Tilidine (9750)

Trimeperidine (9646)

(c) Opium derivatives. Any of the following opium derivatives, their salts, isomers, and salts of isomers, unless specifically excepted by rule of the board or unless listed in another schedule, whenever the existence of these salts, isomers, and salts of isomers is possible within the specific chemical designation:

Acetorphine (9319)

Acetyldihydrocodeine (9051)

Benzylmorphine (9052)

Codeine methylbromide (9070)

Codeine-N-Oxide (9053)

Cyprenorphine (9054)

Desomorphine (9055)

Dihydromorphine (9145)

Drotebanol (9335)

Etorphine (except hydrochloride salt) (9056)

Heroin (9200)

Hydromorphinol (9301)

Methyldesorphine (9302)

Methyldihydromorphine (9304)

Morphine methylbromide (9305)

Morphine methylsulfonate (9306)

Morphine-N-Oxide (9307)

Myrophine (9308)

Nicocodeine (9309)

Nicomorphine (9312)

Normorphine (9313)

Pholcodine (9314)

Thebacon (9315)

- (d) Hallucinogenic substances. Any material, compound, mixture, or preparation which contains any quantity of the following hallucinogenic, psychedelic, or psychogenic substances, their salts, isomers, and salts of isomers, unless specifically excepted by rule of the board or unless listed in another schedule, whenever the existence of these salts, isomers, and salts of isomers is possible within the specific chemical designation:
  - (1) 4-Bromo-2, 5-Dimethoxyamphetamine (7391). Some trade or other names: 4-Bromo-2, 5-Dimethoxy-a-methylphenethylamine; 4-Bromo-2, 5-DMA.

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- (2) 2, 5-Dimethoxyamphetamine (7396). Some trade or other names: 2, 5-Dimethoxy-a-methylphenethylamine; 2, 5-DMA.
- (3) 4-Methoxyamphetamine (7411). Some trade or other names: 4-Methoxy-a-methylphenethylamine; Paramethoxyamphetamine; PMA.
- (4) 5-methoxy-3, 4-methylenedioxy amphetamine (7401). Other Name: MMDA.
- (5) 4-methyl-2, 5-dimethoxyamphetamine (7395). Some trade and other names: 4-methyl-2, 5-dimethoxy-a-methylphenethylamine; DOM; and STP.
- (6) 3, 4-methylenedioxy amphetamine (7400). Other name: MDA.
- (7) 3, 4-methylenedioxymethamphetamine (MDMA) (7405).
- (8) 3, 4, 5-trimethoxy amphetamine (7390). Other name: TMA.
- (9) Bufotenine (7433). Some trade and other names: 3 (B Dimethylaminoethyl) 5 hydroxyindole; 3-(2-dimethylaminonethyl)-5-indolol; N, N-dimethylserotonin; 5-hydroxy-N, N-dimethyltryptamine; mappine.
- (10) Dimethyltryptamine (7434). Some trade or other names: N, N-Diethyltryptamine; DET.
- (11) Diethyltryptamine (7435). Some trade or other names: DMT.
- (12) Ibogaine (7260). Some trade and other names: 7-Ethyl-6, 6b, 7, 8, 9, 10, 12, 13-octahydro-2-methoxy-6, 9-methano-5H-pyrido (1', 2'; 1, 2, azepino 4, 5-b) indole; tabernanthe iboga.
- (13) Lysergic acid diethylamide (7315). Other name: LSD.
- (14) Marijuana (7360).
- (15) Mescaline (7381).
- (16) Parahexyl (7374). Some trade or other names: 3-Hexyl-1-hydroxy-7, 8, 9, 10-Tetrahydro-6, 6, 9-trimethyl-6H-dibenzo (b,d) pyran; Snyhexyl.
- (17) Peyote (7415), including:
  - (A) all parts of the plant that are classified botanically as lophophora williamsii lemaire, whether growing or not;
  - (B) the seeds thereof;
  - (C) any extract from any part of the plant; and
  - (D) every compound, manufacture, salt, derivative, mixture, or preparation of the plant, its seeds, or extracts.
- (18) N-ethyl-3-piperidyl benzilate (7482). Other name: DMZ.
- (19) N-methyl-3-piperidyl benzilate (7484). Other name: LBJ.
- (20) Psilocybin (7437).
- (21) Psilocyn (7438).
- (22) Tetrahydrocannabinols (7370), including synthetic equivalents of the substances contained in the plant, or in the

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resinous extractives of Cannabis, sp. and synthetic substances, derivatives, and their isomers with similar chemical structure and pharmacological activity such as:

- (A)  $\pi^1$  cis or trans tetrahydrocannabinol, and their optical isomers;
- (B)  $\pi^6$  cis or trans tetrahydrocannabinol, and their optical isomers; and
- (C)  $\pi^{3}_{4}$  cis or trans tetrahydrocannabinol, and their optical isomers.

Since nomenclature of these substances is not internationally standardized, compounds of these structures, regardless of numerical designation of atomic positions are covered. Other name: THC.

- (23) Ethylamine analog of phencyclidine (7455). Some trade or other names: N-Ethyl-1-phenylcyclohexylamine; (1-phenylcyclohexyl) ethylamine; N-(1-phenylcyclohexyl) ethylamine; cyclohexamine; PCE.
- (24) Pyrrolidine analog of phencyclidine (7458). Some trade or other names: 1-(1-phenylcyclohexyl)-pyrrolidine; PCP<sub>v</sub>; PHP.
- (25) Thiophene analog of phencyclidine (7470). Some trade or other names: 1-(1-(2-thienyl) cyclohexyl) piperidine; 2-Thienyl Analog of Phencyclidine; TPCP.
- (e) Depressants. Unless specifically excepted in a rule adopted by the board or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a depressant effect on the central nervous system, including its salts, isomers, and salts of isomers whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation:

Gamma-hydroxybutyric acid (other names include GHB; gamma-hydroxybutyrate; 4-hydroxybutanoic acid; sodium oxybate; sodium oxybutyrate) (2010)

Mecloqualone (2572)

Methaqualone (2565)

(f) Stimulants. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation that contains any quantity of the following substances having a stimulant effect on the central nervous system, including its salts, isomers, and salts of isomers:

Fenethylline (1503)

N-ethylamphetamine (1475)

Methcathinone (1237) (Some other trade names:



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2-Methylamino-1-Phenylpropan-I-one; Ephedrone; Monomethylpropion; UR 1431.

SECTION 16. IC 35-48-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 8. (a) The controlled substances listed in this section are included in schedule III.

- (b) Stimulants. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a stimulant effect on the central nervous system, including its salts, isomers (whether optical, position, or geometric), and salts of such isomers whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation:
  - (1) Those compounds, mixtures, or preparations in dosage unit form containing any stimulant substances listed in schedule II which compounds, mixtures, or preparations were listed on April 1, 1986, as excepted compounds under 21 CFR 1308.32, and any other drug of the quantitative composition shown in that list for those drugs or that is the same except that it contains a lesser quantity of controlled substances (1405).
  - (2) Benzphetamine (1228).
  - (3) Chlorphentermine (1645).
  - (4) Clortermine (1647).
  - (5) Phendimetrazine (1615).
- (c) Depressants. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a depressant effect on the central nervous system:
  - (1) Any compound, mixture, or preparation containing:
    - (A) amobarbital (2125);
    - (B) secobarbital (2315);
    - (C) pentobarbital (2270); or
    - (D) any of their salts;

and one (1) or more other active medicinal ingredients which are not listed in any schedule.

- (2) Any suppository dosage form containing:
  - (A) amobarbital (2125);
  - (B) secobarbital (2315);
  - (C) pentobarbital (2270); or
  - (D) any of their salts;

and approved by the Food and Drug Administration for marketing only as a suppository.

(3) Any substance which contains any quantity of a derivative of



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barbituric acid, or any salt thereof (2100).

- (4) Chlorhexadol (2510).
- (5) Glutethimide (2550).
- (6) Lysergic acid (7300).
- (7) Lysergic acid amide (7310).
- (8) Methyprylon (2575).
- (9) Sulfondiethylmethane (2600).
- (10) Sulfonethylmethane (2605).
- (11) Sulfonmethane (2610).
- (12) A combination product containing tiletimine and zolazepam (Telazol) (7295).
- (13) Any drug product containing gamma-hydroxybutyric acid, including its salts, isomers, and salts of isomers, for which an application is approved under section 505 of the federal Food, Drug and Cosmetic Act, 21 U.S.C. 301 et seq. (2012).
- (d) Nalorphine (a narcotic drug) (9400).
- (e) Narcotic Drugs. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation containing any of the following narcotic drugs, or their salts calculated as the free anhydrous base or alkaloid, in the following limited quantities:
  - (1) Not more than 1.8 grams of codeine, per 100 milliliters or not more than 90 milligrams per dosage unit, with an equal or greater quantity of an isoquinoline alkaloid of opium (9803).
  - (2) Not more than 1.8 grams of codeine, per 100 milliliters or not more than 90 milligrams per dosage unit, with one (1) or more active, nonnarcotic ingredients in recognized therapeutic amounts (9804).
  - (3) Not more than 300 milligrams of dihydrocodeinone, per 100 milliliters or not more than 15 milligrams per dosage unit, with a fourfold or greater quantity of an isoquinoline alkaloid of opium (9805).
  - (4) Not more than 300 milligrams of dihydrocodeinone, per 100 milliliters or not more than 15 milligrams per dosage unit, with one (1) or more active nonnarcotic ingredients in recognized therapeutic amounts (9806).
  - (5) Not more than 1.8 grams of dihydrocodeine, per 100 milliliters or not more than 90 milligrams per dosage unit, with one (1) or more active, nonnarcotic ingredients in recognized therapeutic amounts (9807).
  - (6) Not more than 300 milligrams of ethylmorphine, per 100



- milliliters or not more than 15 milligrams per dosage unit, with one (1) or more active, nonnarcotic ingredients in recognized therapeutic amounts (9808).
- (7) Not more than 500 milligrams of opium per 100 milliliters or per 100 grams or not more than 25 milligrams per dosage unit, with one (1) or more active, nonnarcotic ingredients in recognized therapeutic amounts (9809).
- (8) Not more than 50 milligrams of morphine, per 100 milliliters or per 100 grams with one (1) or more active nonnarcotic ingredients in recognized therapeutic amounts (9810).
- (f) Anabolic steroid (as defined in 21 U.S.C. 802(41)(A) and 21 U.S.C. 802(41)(B)).
- (g) The board shall except by rule any compound, mixture, or preparation containing any stimulant or depressant substance listed in subsections (b) through (e) from the application of any part of this article if the compound, mixture, or preparation contains one (1) or more active medicinal ingredients not having a stimulant or depressant effect on the central nervous system, and if the admixtures are included therein in combinations, quantity, proportion, or concentration that vitiate the potential for abuse of the substances which have a stimulant or depressant effect on the central nervous system.
- (h) Any material, compound, mixture, or preparation which contains any quantity of Ketamine.

SECTION 17. IC 35-48-2-10 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 10. (a) The controlled substances listed in this section are included in schedule IV.

- (b) Narcotic drugs. Unless specifically excepted in a rule adopted by the board or unless listed in another schedule, any material, compound, mixture, or preparation containing any of the following narcotic drugs, or their salts calculated as the free anhydrous base or alkaloid, in the following limited quantities:
  - (1) Not more than 1 milligram of difenoxin (9618) and not less than 25 micrograms of atropine sulfate per dosage unit.
  - (2) Dextropropoxyphene (alpha-(+)-4-dimethylamino-1,2-diphenyl-3-methyl-2-propionoxybutane (9273).
- (c) Depressants. Unless specifically excepted in a rule adopted by the board or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances, including its salts, isomers, and salts of isomers whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation:









Alprazolam (2882). Barbital (2145). Bromazepam (2748). Camazepam (2749). Chloral betaine (2460). Chloral hydrate (2465). Chlordiazepoxide (2744). Clobazam (2751). Clonazepam (2737). Clorazepate (2768). Clotiazepam (2752). Cloxazolam (2753). Delorazepam (2754). Diazepam (2765). Estazolam (2756). Ethchlorvynol (2540). Ethinamate (2545). Ethyl loflazepate (2758). Fludiazepam (2759). Flunitrazepam (2763). Flurazepam (2767). Halazepam (2762). Haloxazolam (2771). Ketazolam (2772). Loprazolam (2773). Lorazepam (2885). Lormetazepam (2774). Mebutamate (2800). Medazepam (2836). Meprobamate (2820). Methohexital (2264). Methylphenobarbital (mephobarbital) (2250). Midazolam (2884). Nimetazepam (2837). Nitrazepam (2834). Nordiazepam (2838). Oxazepam (2835). Oxazolam (2839). Paraldehyde (2585). Petrichloral (2591). Phenobarbital (2285). Pinazepam (2883).



Prazepam (2764).

Quazepam (2881).

Temazepam (2925).

Tetrazepam (2886).

Triazolam (2887).

## Zolpidem (Ambien) (2783).

(d) Fenfluramine. Any material, compound, mixture, or preparation which contains any quantity of the following substances, including its salts, isomers (whether optical, position, or geometric), and salts of such isomers, whenever the existence of such salts, isomers, and salts of isomers is possible.

Fenfluramine (1670).

- (e) Stimulants. Unless specifically excepted in a rule adopted by the board or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a stimulant effect on the central nervous system, including its salts, isomers (whether optical, position, or geometric), and salts of such isomers whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation:
  - (1) Diethylpropion (1608).
  - (2) Mazindol (1605).
  - (3) Phentermine (1640).
  - (4) Pemoline (including organometallic complexes and chelates thereof) (1530).
  - (5) Pipradrol (1750).
  - (6) SPA ((-)-1-dimethylamino-1,2-diphenylethane (1635).
- (f) Other substances. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances including its salts:
  - (1) Pentazocine (9709).
- (g) The board may except by rule any compound, mixture, or preparation containing any depressant substance listed in subsection (b), (c), (d), (e), or (f) from the application of any part of this article if the compound, mixture, or preparation contains one (1) or more active medicinal ingredients not having a depressant effect on the central nervous system, and if the admixtures are included therein in combinations, quantity, proportion, or concentration that vitiate the potential for abuse of the substances which have a depressant effect on the central nervous system.

SECTION 18. IC 25-27.5-2-4 IS REPEALED [EFFECTIVE JULY











1, 2001].

SECTION 19. [EFFECTIVE UPON PASSAGE] (a) Not later than July 2, 2001, the respiratory care committee established by IC 25-34.5-2-1 shall have an appropriate application for a student permit available for use by applicants under IC 25-34.5-2-14, as amended by this act.

(b) This SECTION expires July 31, 2001.

SECTION 20. [EFFECTIVE UPON PASSAGE] (a) If the medical licensing board established by IC 25-22.5-2-1 does not establish the fee for a student permit under IC 25-34.5-2-14, as amended by this act, the fee is twenty-five dollars (\$25).

- (b) The fee established by the medical licensing board for a student permit under IC 25-34.5-2-14, as amended by this act, may not be greater than the fee for a license as a respiratory care practitioner.
  - (c) This SECTION expires July 1, 2002.

SECTION 21. [EFFECTIVE UPON PASSAGE] (a) This SECTION applies to an individual who:

- (1) before July 1, 2001, submits a request for an application for a student permit under IC 25-34.5-2-14, as amended by this act; and
- (2) at the time of submitting a request for an application for a student permit:
  - (A) has been employed in or was otherwise under contract or other arrangement with the same respiratory care setting since June 30, 2001, and continues to be employed; and
  - (B) is a student in good standing in a school or program identified in IC 25-34.5-2-14, as amended by this act, since June 30, 2001, and continues to be a student in good standing.
- (b) An individual described in subsection (a) may continue to work in a respiratory care setting as if the individual held a student permit until:
  - (1) the respiratory care committee established by IC 25-34.5-2-1 issues a student permit to the individual, at which time the individual will be a student permit holder under IC 25-34.5-2-14, as amended by this act; or
  - (2) the individual receives notification from the respiratory care committee that the individual's application for a student permit is denied.
  - (c) An individual who is permitted to work under subsection (b)











may only perform those respiratory care procedures that qualify under IC 25-34.5-2-14(c) and IC 25-34.5-2-14(d), as amended by this act.

(d) This SECTION expires October 1, 2001. SECTION 22. An emergency is declared for this act.





Speaker of the House of Representatives	
President of the Senate	C
President Pro Tempore	
Approved:	<b>D</b>
Governor of the State of Indiana	

